

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000011817

1. Entity Name
SOUTHWINDS AT SANDESTIN, INC.

FILED

01 DEC 10 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
9300 HIGHWAY 98
EMERALD COAST PARKWAY
DESTIN FL 32541
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

REINSTATEMENT

4. FEI Number 59-3154275

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Barbara A. Burke* **BARBARA A. BURKE** **SPECIAL ASSISTANT SECRETARY** 12-7-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME RAYMOND, GARY L
STREET ADDRESS 200 BURNARD STREET, SUITE 800
CITY-ST-ZIP VANCOUVER, BC FL V6C3L-6 ☐ Delete

TITLE VTS
NAME ASKEW, VANCE F
STREET ADDRESS 9300 HIGHWAY 98
CITY-ST-ZIP DESTIN FL 32541 ☐ Delete

TITLE DSV
NAME ONKEN, JAMES
STREET ADDRESS 325 LAKE DILLON DRIVE, SUITE 205
CITY-ST-ZIP DILLON CO 30041 ☒ Delete

TITLE V
NAME COLE, WILLIAM JR.
STREET ADDRESS 9300 HIGHWAY 98 WEST
CITY-ST-ZIP DESTIN FL 32541 ☐ Delete

TITLE AS
NAME WYNNE, CONNIE D
STREET ADDRESS 9300 HIGHWAY 98
CITY-ST-ZIP DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500004740833
-12/21/01--01028--006
****750.00 ****750.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE V
NAME Boivin, Jim
STREET ADDRESS 9300 Highway 98 West
CITY-ST-ZIP Destin, FL 32541 ☐ Change ☒ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Vance F. Aske* **VANCE F. ASKE** 10/25/01 850-267-8225
Signature, typed or printed name of signing officer or director Date

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CR2E034 (5/01)